### Case 17-81643 Doc 1 Filed 07/12/17 Entered 07/12/17 16:58:33 Desc Main Document Page 1 of 51

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

## Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for	Levon First name	First name
	example, your driver's license or passport).  Bring your picture	Middle name	Middle name
	identification to your meeting with the trustee.	Harris Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0781	

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Case number (if known) Debtor 1 Levon Harris

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Cas						
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EiNs			
5.	Where you live		If Debtor 2 lives at a different address:			
		804 Robindale Circle Rockford, IL 61107				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Winnebago County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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			Document	Page 3 of 51	
Debtor 1	Levon Harris			Case number (if known)	

Par	Tell the Court About	our Bar	nkruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	■ Chapter 7							
		☐ Cha	pter 11						
		☐ Cha	pter 12						
		☐ Cha	pter 13						
8.	How you will pay the fee	_ а о	bout how yo	u may pay. Typically, if you attorney is submitting your p	are paying	the fee yourself,	the clerk's office in your local co you may pay with cash, cashie ur attorney may pay with a cred	er's check, or money	
		_			•	choose this option, sign and attach the Application for Individuals to Pay			
			•	e in Installments (Official Fo	,	this option only	if you are filing for Chapter 7. B	v law a judgo may	
		b a	ut is not requ pplies to you	uired to, waive your fee, and ir family size and you are ur	may do so able to pay	only if your inco the fee in instal	ome is less than 150% of the off Ilments). If you choose this option orm 103B) and file it with your pe	ficial poverty line that on, you must fill out	
9.	Have you filed for bankruptcy within the last 8 years?	■ No.							
			District		When		Case number		
			District		When		Case number		
			District		When		Case number		
10.	Are any bankruptcy	□No							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ Yes.							
			Debtor	Shelley R. Harris			Relationship to you	Spouse	
			Diatriat	Northern District -	When	8/05/14	Coop number if known	14-82423	
			District	Illinois	when	0/03/14	Case number, if known	14-02423	
			Debtor		When		Relationship to you  Case number, if known		
			District		when		Case number, il known		
11.	Do you rent your	□ No.	Go to li	ne 12.					
	residence?	Yes.	Has yo	ur landlord obtained an evic	tion judgm	ent against you a	and do you want to stay in your	residence?	
				No. Go to line 12.					
				Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	nt About ar	n Eviction Judgm	ent Against You (Form 101A) a	nd file it with this	

Document Page 4 of 51 Case number (if known) Debtor 1 Levon Harris Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor ■ No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure **Bankruptcy Code and are** you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Debtor 1 Levon Harris Document Page 5 of 51 Case number (if known)

Part 5:

### Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

## ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Levon Harris		Docui	Case r	number (if known)
Part	6: Answer These Quest	ions for Re	eporting Purposes		
16.	What kind of debts do you have?	16a.		ly consumer debts? Consumer debts an personal, family, or household purpose."	re defined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		ly business debts? Business debts are investment or through the operation of the	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts yo	ou owe that are not consumer debts or b	usiness debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Cha	pter 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and	■ Yes.		7. Do you estimate that after any exemple available to distribute to unsecured cre	ot property is excluded and administrative expenses ditors?
	administrative expenses are paid that funds will		■ No		
	be available for distribution to unsecured creditors?		☐ Yes		
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000	□ 25,001-50,000
	you estimate that you owe?	□ 50-99		5001-10,000	<b>5</b> 0,001-100,000
		☐ 100-19 ☐ 200-99	· -	□ 10,001-25,000	☐ More than100,000
19.	How much do you	<b>■</b> \$0 - \$5	50.000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?	□ \$50,00	01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐	
20.	How much do you	<b>■</b> \$0 - \$5	50.000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?	□ \$50,0	01 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐	
Part	7: Sign Below				
For	you	I have ex	amined this petition, and I	declare under penalty of perjury that the	information provided is true and correct.
				ter 7, I am aware that I may proceed, if el he relief available under each chapter, ar	igible, under Chapter 7, 11,12, or 13 of title 11, and I choose to proceed under Chapter 7.
				did not pay or agree to pay someone who did the notice required by 11 U.S.C. § 342	o is not an attorney to help me fill out this (b).
		I request	relief in accordance with t	the chapter of title 11, United States Code	e, specified in this petition.
		bankrupto and 3571	cy case can result in fines		oney or property by fraud in connection with a to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		/s/ Levo		Signature of	Debtor 2
			of Debtor 1	Signatule of	2000. 2
		Executed	on _ <b>July 12, 2017</b>	Executed on	
			MM / DD / YYYY		MM / DD / YYYY

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Debtor 1 Levon Harris Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel A	. Springer	Date	July 12, 2017
Signature of A	Attorney for Debtor		MM / DD / YYYY
Daniel A. S	pringer		
Printed name			
Springer La	aw Firm		
Firm name			
2222 E Stat	e St		
Suite 107			
Rockford, II	L 61104		
Number, Street, C	ity, State & ZIP Code		
Contact phone	<b>815.312.4725</b> Ema	il address	dspringerlaw@gmail.com
6314059			
Bar number & Stat	to		<del></del> -

		DOGUIII	HI Paue o ULSI	
Fill in this infor	nation to identify your	case:		
Debtor 1	Levon Harris			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				

☐ Check if this is an amended filing

## Official Form 106Sum

## **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	19,260.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	19,260.00
Par	2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	14,000.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	25,308.56
	Your total liabilities	\$	39,308.56
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,638.18
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,627.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	edules.
7.	Yes What kind of debt do you have?		
	Vous debte are primarily consumer debte. Consumer debte are those "incurred by an individual primarily for	n noroonal	family or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Page 9 of 51
Case number (if known) Debtor 1 Levon Harris

8.	From the <i>Statement of Your Current Monthly Income</i> : Copy your total current monthly income from Official Form 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.	\$ 5,100.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Document Page 10 of 51 Fill in this information to identify your case and this filing: Debtor 1 **Levon Harris** Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Dodge Make: Who has an interest in the property? Check one 3 1 the amount of any secured claims on Schedule D: Durango Creditors Who Have Claims Secured by Property. Debtor 1 only Model: 2001 Debtor 2 only Current value of the Current value of the 173.000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another \$1,250.00 \$1,250.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Nissan Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: **Altima** Model: Debtor 1 only Creditors Who Have Claims Secured by Property. 2015 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another \$14,100.00 \$14,100.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

■ No

□ Yes

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## 12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

■ No

☐ Yes. Describe.....

### 13. Non-farm animals

Examples: Dogs, cats, birds, horses

No

☐ Yes. Describe.....

page 2

De	btor 1 Leve	on Harris	L	Document Page 12 of 51  Case number (if known)	
	Any other per	rsonal and house	hold items you did	not already list, including any health aids you did not list	
	☐ Yes. Give s	pecific information	1		
15				art 3, including any entries for pages you have attached	\$2,710.00
		Your Financial Asse		any of the following?	Current value of the
Б	you own or n	ave any legal of e	equitable interest in	any of the following:	portion you own? Do not deduct secured claims or exemptions.
	■ No		our wallet, in your ho	ome, in a safe deposit box, and on hand when you file your petit	ion
	in	necking, savings, o		ounts; certificates of deposit; shares in credit unions, brokerage s with the same institution, list each.	houses, and other similar
	□ No ■ Yes			Institution name:	
		17.1.	Savings	ABD Credit Union	\$0.00
		17.2.	Checking	First Northern Credit Union	\$100.00
	Examples: Bo		cly traded stocks ent accounts with bro	okerage firms, money market accounts	
	■ No □ Yes		Institution or issuer	name:	
	Non-publicly joint venture  ■ No		interests in incorpo	orated and unincorporated businesses, including an intere	st in an LLC, partnership, and
	_	•	about them	 % of ownership:	
	Negotiable in	struments include	personal checks, cas	otiable and non-negotiable instruments Shiers' checks, promissory notes, and money orders. Ansfer to someone by signing or delivering them.	
		pecific information Iss	about them suer name:		
		r pension accoun terests in IRA, ERI		103(b), thrift savings accounts, or other pension or profit-sharing	ı plans
	Yes. List ea	ch account separa Type	itely. of account:	Institution name:	
		401(	k)	Current Employer	Unknown
22.	Your share of	osits and prepayr fall unused deposigreements with lan	its you have made so	o that you may continue service or use from a company	

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Case number (if known)

Document Debtor 1 **Levon Harris** 

		Rent	Current Land	llord	\$1,100.00
23	. <b>Annuities</b> (A contra	ct for a periodic payment o	of money to you, either for life	or for a number of years)	
	☐ Yes	Issuer name and descrip	otion.		
24		eation IRA, in an account 1), 529A(b), and 529(b)(1		m, or under a qualified state t	uition program.
	Yes	Institution name and des	scription. Separately file the re	cords of any interests.11 U.S.C	:. § 521(c):
25	. Trusts, equitable o	r future interests in prop	perty (other than anything lis	sted in line 1), and rights or po	owers exercisable for your benefit
	☐ Yes. Give specific	information about them			
26			rets, and other intellectual p proceeds from royalties and li		
		information about them			
27	Examples: Building	es, and other general int permits, exclusive license		ldings, liquor licenses, profession	onal licenses
	■ No □ Yes. Give specific	information about them			
M	oney or property ow	ed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28	. Tax refunds owed	to vou			
	No		ncluding whether you already	filed the returns and the tax yea	ars
29	Family support     Examples: Past due     No     Yes. Give specific	771	ousal support, child support, n	naintenance, divorce settlemen	t, property settlement
30		wages, disability insurance ; unpaid loans you made t		, sick pay, vacation pay, worke	rs' compensation, Social Security
31	Interests in insurar	nce policies	; health savings account (HSA	s); credit, homeowner's, or rente	er's insurance
	■ No □ Yes. Name the ins	surance company of each Company name:		Beneficiary:	Surrender or refund value:
32	. Any interest in pro If you are the benef someone has died.	perty that is due you from iciary of a living trust, expension	m someone who has died ect proceeds from a life insura	ance policy, or are currently enti	tled to receive property because
	Yes. Give specific	c information			
33	Examples: Accident		t you have filed a lawsuit or insurance claims, or rights to s	made a demand for payment	
Of	☐ No ficial Form 106A/B		Schedule A/B: Prope	erty	page

5.1.	Case 17-81643		07/12/17 ument	Entered 0° Page 14 of	7/12/17 16:58:33 51	Desc Main
Debtor 1	Levon Harris				Case number (if known)	
■ Ye	es. Describe each claim					
					WC 023838, Debtor	
		is represented	by Reese 8	Reese, Rockfo	ord, IL)	Unknown
_	er contingent and unliquidate	ed claims of every nat	ture, includin	g counterclaims	of the debtor and rights to	set off claims
■ No	o es. Describe each claim					
ште	s. Describe each daim					
35. <b>Any</b> ■ No	financial assets you did not	already list				
_ :::	es. Give specific information					
	o. Give opcome information					
36. <b>Ad</b>	d the dollar value of all of yo	ur entries from Part 4	l, including a	ny entries for pag	jes you have attached	¢4 200 00
for	Part 4. Write that number he	re				\$1,200.00
Part 5:	Describe Any Business-Related	Property You Own or Ha	ive an Interest	In. List any real esta	ate in Part 1.	
37. <b>Do yo</b>	ou own or have any legal or equit	able interest in any bus	iness-related p	roperty?		
No.	Go to Part 6.					
☐ Yes	. Go to line 38.					
	Describe Any Farm- and Comme If you own or have an interest in fai		operty You Ow	n or Have an Interes	st In.	
	ou own or have any legal or	equitable interest in	any farm- or	commercial fishir	ng-related property?	
<b>—</b> N	No. Go to Part 7.					
	es. Go to line 47.					
Part 7:	Describe All Property You C	Own or Have an Interest	in That You Die	d Not List Above		
53. <b>Do</b> y	ou have other property of an	y kind you did not al	ready list?			
	mples: Season tickets, country	club membership				
■ No						
ЦYe	es. Give specific information					
54 <b>Ad</b>	d the dollar value of all of yo	ur entries from Part 7	Write that n	umber here		\$0.00
54. Au	u tile dollar value of all of yo	ui entiles iloili i ait i	. Wille that i	uniber nere		<u> </u>
Part 8:	List the Totals of Each Part of	of this Form				
Tarto.	List the Totals of Lacil Fait o	1 1113 1 01111				
55. <b>Pa</b>	rt 1: Total real estate, line 2 .					\$0.00
56. <b>Pa</b>	rt 2: Total vehicles, line 5			\$15,350.00		
57. <b>Pa</b>	rt 3: Total personal and hous	ehold items, line 15	_	\$2,710.00		
	rt 4: Total financial assets, lir			\$1,200.00		
	rt 5: Total business-related p			\$0.00		
	rt 6: Total farm- and fishing-r		52	\$0.00		
61. <b>Pa</b>	rt 7: Total other property not	listed, line 54	+	\$0.00		
62. <b>To</b>	tal personal property. Add line	es 56 through 61	_	\$19,260.00	Copy personal property t	otal <b>\$19,260.00</b>
63. <b>To</b>	tal of all property on Schedul	le A/B. Add line 55 + li	ne 62			\$19.260.00

Official Form 106A/B Schedule A/B: Property page 5

		DUGUITE	III FAUE TO OLOT	
Fill in this infor	mation to identify your	case:		
Debtor 1	Levon Harris			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the	Property You	Claim as	Exempt
---------	--------------	--------------	----------	--------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	portion you own	Ame	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2001 Dodge Durango 173,000 miles Line from Schedule A/B: 3.1	\$1,250.00		\$2,400.00	735 ILCS 5/12-1001(c)
Ellie Holli Golledale 74 B. G.1			100% of fair market value, up to any applicable statutory limit	
2015 Nissan Altima Line from Schedule A/B: 3.2	\$14,100.00		\$100.00	735 ILCS 5/12-1001(b)
Line Irom Scriedule A/B. 3.2			100% of fair market value, up to any applicable statutory limit	
TV, Stereo, Playstation 4 Game Console	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Basketball Line from Schedule A/B: 9.1	\$10.00		\$10.00	735 ILCS 5/12-1001(b)
Line Holli Schedule PAB. 3.1			100% of fair market value, up to any applicable statutory limit	
Used Clothing Line from Schedule A/B: 11.1	\$600.00		\$600.00	735 ILCS 5/12-1001(a)
Line Hom Soliedule A/D. 1111			100% of fair market value, up to any applicable statutory limit	

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De	Levon Harris			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Checking: First Northern Credit Union	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	401(k): Current Employer Line from Schedule A/B: 21.1	Unknown		100%	735 ILCS 5/12-1006
	Line Holli Schedule AVD. 21.1			100% of fair market value, up to any applicable statutory limit	
	Workers Compensation Claim (Case #15 WC 023838, Debtor is	Unknown		100%	820 ILCS 305/21
	represented by Reese & Reese, Rockford, IL) Line from Schedule A/B: 33.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustme	nt.)
	No				
	Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

	Ca	Se 17-81643	Doc 1 Filed 07/12/17	Page 17	1 07/12/17 16:58 of 51	:33 Desc IV	iain
Fill in	this inforr	nation to identify you					
Debto	r 1	Levon Harris					
		First Name	Middle Name	Last Name			
Debtoi (Spouse	r 2 e if, filing)	First Name	Middle Name	Last Name			
United	l States Ba	nkruptcy Court for the	: NORTHERN DISTRICT OF IL	LINOIS			
	number _						
(if knowr	n)						if this is an ded filing
Sch		D: Creditors	Who Have Claims		<u> </u>		12/15
is neede		Additional Page, fill it	If two married people are filing togetl out, number the entries, and attach it				
1. Do ar	ny creditors	have claims secured b	y your property?				
	No. Check	this box and submit t	his form to the court with your othe	r schedules. Yo	u have nothing else to re	eport on this form.	
	Yes. Fill in	all of the information	below.				
Part 1	List A	II Secured Claims					
2. List	all secured	claims. If a creditor has	more than one secured claim, list the cre	editor separately	Column A C	Column B	Column C
			s a particular claim, list the other creditorical order according to the creditor's nan		Do not deduct the th	alue of collateral nat supports this laim	Unsecured portion If any
	Exeter Fir		Describe the property that secures	the claim:	\$14,000.00	\$14,100.00	\$0.00
C	Creditor's Name	9	2015 Nissan Altima				
F	PO Box 1	kruptcy Dept. 66097 75016-6097	As of the date you file, the claim is: apply.	: Check all that			
_	<u> </u>	, City, State & Zip Code	☐ Contingent ☐ Unliquidated				
		, J., Jiako a zip oodo	- Orinquidated				

Date debt was incurred Last 4 digits of account number \$14,000.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. \$14,000.00

Nature of lien. Check all that apply.

☐ Judgment lien from a lawsuit

☐ Other (including a right to offset)

An agreement you made (such as mortgage or secured

 $\square$  Statutory lien (such as tax lien, mechanic's lien)

☐ Disputed

car loan)

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Who owes the debt? Check one.

lacksquare At least one of the debtors and another

☐ Check if this claim relates to a

Debtor 1 and Debtor 2 only

community debt

Write that number here:

■ Debtor 1 only

Debtor 2 only

	Case 17	-01043 D0C	Docume		712/17 10.50 51	.33 De	SC IV	ιαπι
Fil	I in this information to	identify your case:						
De	btor 1 Levo	on Harris						
DC	First Na		Middle Name	Last Name				
	btor 2							
(Sp	ouse if, filing) First Na	ame	Middle Name	Last Name	_			
Un	ited States Bankruptcy	Court for the: NO	RTHERN DISTRICT	OF ILLINOIS				
	se number						Check	if this is an
						_		ed filing
Se a iny Sch	executory contracts or u edule G: Executory Cont edule D: Creditors Who I	e as possible. Use Par inexpired leases that of racts and Unexpired L Have Claims Secured I	t 1 for creditors with P could result in a claim. eases (Official Form 1 by Property. If more sp	Ured Claims  RIORITY claims and Part 2 for a contract (1966). Do not include any cre acce is needed, copy the Part on to report in a Part, do not for the contract (1966).	s on Schedule A/B: F ditors with partially s you need, fill it out,	Property (Office secured claim number the earth of the	ial For s that a ntries in	m 106A/B) and on tre listed in the boxes on the
nam	ne and case number (if kr	nown).		on to report in a Part, do not i	ile tilat Fart. Off tile t	op or arry aud	itionai	pages, write your
		r PRIORITY Unsecu						
1.	Do any creditors have p	riority unsecured clai	ms against you?					
	☐ No. Go to Part 2.							
	Yes.							
2.	identify what type of claim	n it is. If a claim has both alphabetical order acco	n priority and nonpriority ording to the creditor's n	one priority unsecured claim, list amounts, list that claim here a name. If you have more than tweeditors in Part 3.	nd show both priority a	ind nonpriority	amount	ts. As much as
	(For an explanation of ea	ch type of claim, see the	e instructions for this for	rm in the instruction booklet.)				
					Total claim	Priority amount		Nonpriority amount
2.1	Brandi Marie K	ina	Last 4 digits of	f account number	\$0.00		\$0.00	\$0.00
	Priority Creditor's Na  2308 MacGrego	ime		debt incurred?		<u> </u>	<del>, 0.00</del>	
	Albany, GA 317			ver file the eleim in Oberel	II dhad aanh			
	Number Street City S Who incurred the debt		<u> </u>	you file, the claim is: Check a	ііі тпат арріу			
	■ Debtor 1 only	Chook one.	☐ Contingent☐ Unliquidated	4				
	Debtor 2 only		_ `	ı				
	,		☐ Disputed	ITY unsecured claim:				
	Debtor 1 and Debtor							
	At least one of the d	ebtors and another	Domestic su	upport obligations				
	☐ Check if this claim	•	_	certain other debts you owe the	•			
	Is the claim subject to	offset?	☐ Claims for d	eath or personal injury while yo	u were intoxicated			
	■ No		Other. Spec					
	☐ Yes			Child Support				

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Levon Harris		Case number (if know)		
2.2 IRS	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
Priority Creditor's Name Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred?	2012		
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.	☐ Contingent			
Debtor 1 only	☐ Unliquidated			
Debtor 2 only	☐ Disputed			
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	iim:		
☐ At least one of the debtors and another	☐ Domestic support obligations			
☐ Check if this claim is for a community debt	Taxes and certain other debts	ou owe the government		
Is the claim subject to offset?	Claims for death or personal in	ury while you were intoxicated		
■ No	Other. Specify			
Yes	Income Ta	xes		
<ol> <li>List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the othe Part 2.</li> </ol>	claim. For each claim listed, identify wl	nat type of claim it is. Do not list claims	s already included in Part	1. If more Page of
4.1 Alpine Bank	Last 4 digits of account numb	er		\$411.00
Nonpriority Creditor's Name 1700 N. Alpine Road Rockford, IL 61107	When was the debt incurred?			<b>********</b>
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the cla	im is: Check all that apply		
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsec	ured claim:		
☐ Check if this claim is for a community debt	Student loans			
Is the claim subject to offset?	Obligations arising out of a s report as priority claims	eparation agreement or divorce that y	ou did not	
■ No		aring plans, and other similar debts		
Yes	Other. Specify Overdra	ft Fees		

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Case number (if know)

AT&T	Last 4 digits of account number	\$1,208.
Nonpriority Creditor's Name PO Box 6416	When was the debt incurred?	
Carol Stream, IL 60197  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The of the date year me, and damn of officer an indicapping	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	lacksquare Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Utilities	
GM Financial	Last 4 digits of account number	\$11,321.
Nonpriority Creditor's Name PO Box 181145	When was the debt incurred?	
Arlington, TX 76096		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Auto Deficiency	
Great American Financial	Last 4 digits of account number	\$763
Nonpriority Creditor's Name 20 West Wacker Drive, Suite 2275 Chicago, IL 60606	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	у	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Personal Loan	

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Debtor 1 Levon Harris Case number (if know) 4.5 **OSF St. Anthony Med Center** Last 4 digits of account number \$1.966.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 5510 East State St. Rockford, IL 61108-2381 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes 4.6 **Personal Finance** Last 4 digits of account number \$3,800.00 Nonpriority Creditor's Name When was the debt incurred? 19065 Hickory Creek Drive Mokena, IL 60448 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Personal Loan ☐ Yes **Rockford Gastroenterology** \$240.00 4.7 **Associate** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. 401 Roxbury Rd. Rockford, IL 61107-6075 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical Bills

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Case number (if know)

Debtor	1 Levon Harris	Case number (if know)	
4.8	Rockford Radiology	Last 4 digits of account number	\$101.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	_	□ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	■ Other. Specify Medical Bills	
4.9	Security Finance Corporation  Nonpriority Creditor's Name	Last 4 digits of account number	\$1,401.00
	Attn: Bankruptcy Dept. PO Box 3146	When was the debt incurred?	
	Spartanburg, SC 29304	- Accepted to the control of the con	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Personal Loan	
4.1	Swedish American Health System	Last 4 digits of account number	\$682.56
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 1401 East State Street	When was the debt incurred?	
	Rockford, IL 61104  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Bills	

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Case number (if know) Debtor 1 Levon Harris 4.1 T-Mobile Bankruptcy Team \$1,599.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 53410 When was the debt incurred? Bellevue, WA 98015-3410 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utilities ☐ Yes 4.1 World Financial Network Bank \$1,816.00 Last 4 digits of account number Nonpriority Creditor's Name 4590 E. Broad St. When was the debt incurred? Columbus, OH 43213 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Extension ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Blatt Hasenmiller Leibsker & Moore Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 211 Landmark Drive, Suite C-1 ■ Part 2: Creditors with Nonpriority Unsecured Claims Normal, IL 61761 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Convergent Healthcare Inc. Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. ■ Part 2: Creditors with Nonpriority Unsecured Claims 121 NE Jefferson St. Suite 100 Peoria, IL 61602 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Enhanced Recovery Company** Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. ■ Part 2: Creditors with Nonpriority Unsecured Claims PO Box 57547 Jacksonville, FL 32241 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?

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Line 4.2 of (Check one):

**Enhanced Recovery Company** 

☐ Part 1: Creditors with Priority Unsecured Claims

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Debtor 1 Levon Harris		Case number (if know)
Attn: Bankruptcy Dept. PO Box 57547		■ Part 2: Creditors with Nonpriority Unsecured Claims
Jacksonville, FL 32241	Last 4 digits of account number	
Name and Address Equifax PO Box 740256	On which entry in Part 1 or Part Line 4.3 of (Check one):	2 did you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims
Atlanta, GA 30374	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Experian PO Box 4500	On which entry in Part 1 or Part Line 4.3 of (Check one):	2 did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Allen, TX 75013	Last 4 digits of account number	
Name and Address James C. Thompson 515 N. Court St. Rockford, IL 61103	On which entry in Part 1 or Part Line <b>4.10</b> of ( <i>Check one</i> ):	2 did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Mutual Management Services Co., LLC 7177 Crimson Ridge Dr., Suite 10 PO Box 8740 Rockford, IL 61126-6235	On which entry in Part 1 or Part Line <b>4.1</b> of ( <i>Check one</i> ):	2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Nookiora, 12 01120 0230	Last 4 digits of account number	
Name and Address  Mutual Management Services Co.,  LLC 7177 Crimson Ridge Dr., Suite 10 PO Box 8740	On which entry in Part 1 or Part Line <b>4.10</b> of ( <i>Check one</i> ):	2 did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims  ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Rockford, IL 61126-6235	Last 4 digits of account number	
Name and Address Portfolio Recovery Associates Attn: Bankruptcy Dept. 120 Corporate Blvd., Ste 100		2 did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims  ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Norfolk, VA 23502	Last 4 digits of account number	
Name and Address Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108	On which entry in Part 1 or Part Line 4.5 of (Check one):	2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Nockiola, ie 61106	Last 4 digits of account number	
Name and Address Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108	On which entry in Part 1 or Part Line <b>4.8</b> of ( <i>Check one</i> ):	2 did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims  ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108	Line 4.7 of (Check one):	2 did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address TransUnion 555 West Adams Street	On which entry in Part 1 or Part Line 4.3 of (Check one):	2 did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims

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Levoii nairis		Case fluitiber (ii know)					
Chicago, IL 60661		■ Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account number						
Name and Address	On which entry in Part 1 or Part 2 c	id you list the original creditor?					
Winnebago County Circuit Court	Line 4.10 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
400 W State St 2015 SC 789 Rockford, IL 61101	Part 2: Creditors with Nonpriority Unsecured Claims						
	Last 4 digits of account number						
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?						
Winnebago County Circuit Court	Line 4.12 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
400 W State St 2017 SC 3 Rockford, IL 61101		Part 2: Creditors with Nonpriority Unsecured Claims					
Nockiola, iE 01101	Last 4 digits of account number						
Name and Address	On which entry in Part 1 or Part 2 c	id you list the original creditor?					
Wisconsin Child Support	Line 2.1 of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims					
WI-SCTF PO Box 74200 Milwaukee, WI 53274		☐ Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account number						

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total				-	
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	00.	energy discourse staine. While that amount hore.	04.	Ψ	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	00.	Total Friends, Add miles od unough od.	00.	Ψ	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	60	\$	0.00
	6h.	you did not report as priority claims	6g. 6h.	\$ ——	
		Debts to pension or profit-sharing plans, and other similar debts		Ф	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	25,308.56
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	25,308.56

		DOGUITE	III PAUE ZO OI SI	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Levon Harris			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3	<u> </u>		Oldio	211 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>

	0430 17 01040 1	Docume	nt Page 27 c	of 51	OO Best Main
Fill in this in	nformation to identify your	case:			
Debtor 1	Levon Harris				
D - l- ( 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numbe	er				
(if known)					<ul><li>Check if this is an amended filing</li></ul>
Schedu Codebtors a Deople are fi	iling together, both are equ	re also liable for any debt ally responsible for supp	lying correct informat	tion. If more space is n	ate as possible. If two married eeded, copy the Additional Page, of any Additional Pages, write
our name a	and case number (if known)	. Answer every question.	•		o o, uny , tautionai r agoo, witto
1. DO y	ou have any codebiors: (ii)	you are ming a joint case, o	o not list either spouse	as a codebior.	
■ No □ Yes					
	n the last 8 years, have you, California, Idaho, Louisiana,				y states and territories include
■ No. G	So to line 3.				
`	Did your spouse, former spou	use, or legal equivalent live	with you at the time?		
in line 2	2 again as a codebtor only i 06D), Schedule E/F (Official	f that person is a guarant	or or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
	olumn 1: Your codebtor Ime, Number, Street, City, State and ZI	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	е
	ame			☐ Schedule E/F, I	
				☐ Schedule G, lin	e
Nu Ci	umber Street ty	State	ZIP Code	_	
3.2				☐ Schedule D, lin	e
	ame			□ Schedule E/F, I	
				☐ Schedule G, lin	e

Street

State

Number

City

ZIP Code

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	in this information t										
Del	otor 1	Levon Harri	S			_					
	otor 2 buse, if filing)					_					
Uni	ted States Bankrup	tcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_					
	se number			-			□ A		ed filing ent showin	g postpetition	
0	fficial Form	106I					N	1M / DD/ \	/YYY		
S	chedule I:	Your Inc	ome								12/15
spo atta	use. If you are sep ch a separate she tt 1: Describ Fill in your empl	parated and you et to this form. e Employment	are married and not filir r spouse is not filing w On the top of any additi	ith you, do not inclu	ıde infor	mati	on about	t your spo umber (if	ouse. If mo known). A	ore space is	needed,
	information.							□ Empl		ing spouse	
	attach a separate information about	ou have more than one job, ch a separate page with rmation about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>	_				mployed		
	employers.		Occupation	Assembly							
	Include part-time, self-employed wo		Employer's name	Chrysler							
	Occupation may i or homemaker, if		Employer's address	3000 W Chrysle Belvidere, IL 61							
			How long employed t	here?				_			
Par	Give De	tails About Mor	nthly Income								
<b>Esti</b> spou	mate monthly incouse unless you are	ome as of the dasseparated.	ate you file this form. If	you have nothing to r	eport for	any	line, write	e \$0 in the	space. Inc	clude your no	n-filing
	ou or your non-filing e space, attach a se		ore than one employer, co	ombine the informatio	on for all	empl	oyers for	that perso	on on the li	nes below. If	you need
							For Del	otor 1		btor 2 or ng spouse	
2.			ry, and commissions (b calculate what the monthl		2.	\$	4	,930.21	\$	N/A	
3.	Estimate and lis	t monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$	4,93	30.21	\$	N/A	

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Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J.  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data. if it	Debtor 1	Levon Harris	-	С	ase number (if	known)				
Copy line 4 here					For Debtor 1	I				
5. List all payroll deductions:  5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5c. Insurance 5c. Voluntary contributions for retirement fund loans 5c. Insurance 5c. Voluntary contributions for retirement fund loans 5c. Insurance 5c. Voluntary Contributions for Stript Strip	0-	any line 4 hore	4		¢ 4.04	20.04		n-filing s	-	
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. So. 0.00 \$ N/A 5d. Required repayments of retirement fund loans 5d. Social	CC	ppy line 4 nere	4.		<b>Φ</b> 4,9.	30.21	φ_		N/A	_
5b. Mandatory contributions for retirement plans 5c. \$0.00 \$ N/A 5d. Required repayments of retirement fund loans 5c. \$0.00 \$ N/A 5d. Required repayments of retirement fund loans 5c. \$0.00 \$ N/A 5d. Required repayments of retirement fund loans 5c. \$0.00 \$ N/A 5d. Required repayments of retirement fund loans 5c. \$0.00 \$ N/A 5d. \$0.00 \$ \$ N/A 5d. \$0.00 \$ \$ N/A 5d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. \$0.00 \$ \$ N/A 6d. Add the payroll deductions. Add lines 5a+5b+5c-5d+5e+5f+5g+5h. \$0.00 \$ \$ N/A 6d. Add the payroll deductions. Add lines 5a+5b+5c-5d+5e+5f+5g+5h. \$0.00 \$ \$ N/A 6d. Add the payroll deductions. Add lines 5a+5b+5c-5d+5e+5f+5g+5h. \$0.00 \$ \$ N/A 6d. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross raceipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  8g. Pension or retirement income 8g. Pension or retirement income 8d. Pension or retirement income 8d. Social Security 8d. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$0.00 \$ N/A 8h. Other monthly income. Add lines 7 line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  10. \$2,638.18	5. <b>Lis</b>	st all payroll deductions:								
5b. Mandatory contributions for retirement plans 5c. \$0.00 \$ N/A 5d. Required repayments of retirement fund loans 5c. \$0.00 \$ N/A 5d. Required repayments of retirement fund loans 5c. \$0.00 \$ N/A 5d. Required repayments of retirement fund loans 5c. \$0.00 \$ N/A 5d. Required repayments of retirement fund loans 5c. \$0.00 \$ N/A 5d. \$0.00 \$ \$ N/A 5d. \$0.00 \$ \$ N/A 5d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. \$0.00 \$ \$ N/A 6d. Add the payroll deductions. Add lines 5a+5b+5c-5d+5e+5f+5g+5h. \$0.00 \$ \$ N/A 6d. Add the payroll deductions. Add lines 5a+5b+5c-5d+5e+5f+5g+5h. \$0.00 \$ \$ N/A 6d. Add the payroll deductions. Add lines 5a+5b+5c-5d+5e+5f+5g+5h. \$0.00 \$ \$ N/A 6d. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross raceipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  8g. Pension or retirement income 8g. Pension or retirement income 8d. Pension or retirement income 8d. Social Security 8d. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$0.00 \$ N/A 8h. Other monthly income. Add lines 7 line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  10. \$2,638.18	5a	. Tax, Medicare, and Social Security deductions	5a.		\$ 1,50	06.83	\$		N/A	
5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5f. Sp. \$0.00 \$ N/A 5g. Union dues 5f. Domestic support obligations 5f. \$706.33 \$ N/A 5g. Union dues 5f. Domestic support obligations 5f. \$706.33 \$ N/A 5g. \$78.87 \$ N/A 5h. Other deductions. Specify: 5h. \$0.00 \$ \$ N/A 6. Add the payroll deductions. Add lines \$5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 2,292.03 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,638.18 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. S 0.00 \$ N/A 8c. Social Security 8e. Social Security 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: 8g. Pension or retirement income 8g. S 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 7+ line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. \$4\$ \$ 1. \$4\$	5b	. Mandatory contributions for retirement plans	5b.				\$		N/A	<del>-</del>
5e. Insurance  5f. Domestic support obligations  5f. Domestic support obligations  5f. To06.33 \$ N/A  5g. \$ 706.33 \$ N/A  5g. \$ 78.87 \$ N/A  5h. Other deductions. Specify:  5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  6. \$ 2,292.03 \$ N/A  7. \$ 2,638.18 \$ N/A  8. List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and from operating a business, arceipts, ordinary and necessary business expenses, and the total monthly in income.  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8e. Social Security  8f. Other government assistance that you regularly receive include acts assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (herefits under the Supplemential Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income  8g. \$ 0.00 \$ N/A  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/A  9. Add all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already	5c		5c.		·	0.00	\$			_
5f. Domestic support obligations 5g. Union dues 5g. Union dues 5g. Vinion dues		,			·					_
5g. Union dues 5h. Other deductions. Specify: 5g. \$76.87 \$ N/A 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$2,292.03 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$2,638.18 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 \$ N/A 8d. Unemployment compensation 8d. \$0.00 \$ N/A 8d. Unemployment compensation 8d. \$0.00 \$ N/A 8d. Unemployment compensation 8d. \$0.00 \$ N/A 8d. Vinemployment compensation 8d. \$0.00 \$ N/A 8d. Unemployment compensation 8d. \$0.00 \$ N/A 8d. Vinemployment compensation 8d. \$0.00 \$ N/A 8d. Vinemployment compensation 8d. \$0.00 \$ N/A 8d. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specity: 8f. \$0.00 \$ N/A 8g. Pension or retirement income 8g. \$0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$0.00 \$ N/A 10. Calculate monthly income. Add lines 8a+8b-8c+8d+8e+8f+8g+8h. 9. \$0.00 \$ N/A 11. +\$ \$ 1.					·		: -			_
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	Wı	ite that amount on the Summary of Schedules and Statistical Summary of Certain							\$	2,638.18 ned
13. Do you expect an increase or decrease within the year after you file this form?	13. <b>D</b> c		?							
■ No.  □ Yes Explain:										

## Case 17-81643 Doc 1 Filed 07/12/17 Entered 07/12/17 16:58:33 Desc Main Document Page 30 of 51

Debtor 1 Levon Harris  Debtor 2 (Spoose, filting)  Debtor 2 (Spoose, filting)  Debtor 3 (Spoose, filting)  Debtor 4 (Spoose, filting)  Debtor 5 (Spoose, filting)  Debtor 6 (Spoose, filting)  Debtor 7 (Spoose, filting)  Debtor 8 (Spoose, filting)  Debtor 9 (Spoose, filting)  Debtor 9 (Spoose, filting)  Debtor 1 106J  Schedule J: Your Expenses  12/15  Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  The this a joint case?  No. Go to line 2.  No. Go to line 2.  Do not list Debtor 1 and Pyes.  Do not list Debtor 1 and Pyes.  Do not list Debtor 1 and Debtor 2.  Do not list Debtor 1 and Debtor 2.  Do not list Debtor 1 and Pyes.  Do not list Debtor 1 and Debtor 2.  Do you wave dependents?  Do not state the dependents names.  Son 15   Yes   Debtor 2   No.   No	Fill	in this information to identify your case:			
Debtor 2   Spouwe, if filing)   An amended filing   An amended fil	Deb	otor 1 Leven Harris		Sheck if this is:	
Spouse, if filing    United States Bankruptory Court for the:   NORTHERN DISTRICT OF ILLINOIS   MM / DD / YYYY		Levon nams			1
United States Bankruptory Count for the: NORTHERN DISTRICT OF ILLINOIS  Case number (Il torown)  Official Form 106J  Schedule J: Your Expenses  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (If known). Answer every question.  Parts: Describe Your Household  1. Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No.  On to list Debtor 1 and Yes. Fill out this information for Debtor 2.  Do not state the dependents names.  Son 15   No.   Yes.   No.   No.   Yes.   No.   Yes.					
Case number (If known)    Continued   Cont	(Spo	ouse, if filing)		13 expenses as of	f the following date:
Official Form 106J Schedule J: Your Expenses  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part I: Describe Your Household  I Is this a joint case?  No. Go to line 2  Yes. Does Debtor 2 live in a separate household?  No. Go to line 2  Yes. Does Debtor 2 live in a separate household?  No Do not list Debtor 1 and Pyes. Fill out this information for Debtor 2.  Do not state the dependents?  Do not state the dependents names.  Son Daughter Debtor 1 and Pyes.  Daughter 15   No	Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		MM / DD / YYYY	
Schedule J: Your Expenses  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Text   Describe Your Household	l				
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 12	O	fficial Form 106J			
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 12	S	chedule J: Your Expenses			12/15
No. Go to line 2.   Yes. Does Debtor 2 live in a separate household?   No   Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.	Be info	as complete and accurate as possible. If two married people are filing ormation. If more space is needed, attach another sheet to this form. Omber (if known). Answer every question.			
No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  Yes. Destor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  Do you have dependents?  No.  Do not list Debtor 1 and Debtor 2.  Do not state the dependents names.  Do not state the dependents names.  Son  Daughter  15  Yes  No.  Daughter  15  Yes  No.  Yes  3.  Do your expenses include expenses of people other than yourself and your dependents.  Yes  Tattory illing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of your bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$ 0.00  4b. Property, homeowner's, or renter's insurance  4c. \$ 0.00  4d. Homeowner's association or condominium dues					
No   Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  2. Do you have dependents?   No   Debtor 1 and Debtor 1 and Debtor 2.    Do not list Debtor 1 and Debtor 2.   Fill out this information for Debtor 1 or Debtor 2   Dependent's age   No   Debtor 2   Debtor 1 or Debtor 2   Debtor 1 or Debtor 2   Dependent's age   No   No   No   No   No   No   No   N		■ No. Go to line 2.			
Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.    Po you have dependents?		·			
Do not list Debtor 1 and Debtor 2.  Do not state the dependents names.  Son  15  Yes  No  Page  No  No  Page  No  No  No  Page  No  No  No  Page  No  No  No  No  No  No  No  No  No  N			arate Household of I	Debtor 2.	
Debtor 2.  Debtor 1 or Debtor 2 age live with you?    No	2.	Do you have dependents?			
dependents names.    Son   15		■ Yes		•	
dependents names.    Son   15		Do not state the			■ No
Daughter    Daughter   15				15	☐ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?    Stimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$ 0.00  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$ 0.00  4d. Homeowner's association or condominium dues  4d. \$ 0.00		_	_		■ No
3. Do your expenses include expenses of people other than yourself and your dependents?    Part 2:		Dau	ghter	15	-
3. Do your expenses include expenses of people other than yourself and your dependents?  Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$ 0.00  4b. Property, homeowner's, or renter's insurance  4c. \$ 0.00  4d. Home maintenance, repair, and upkeep expenses  4d. \$ 0.00  4d. Homeowner's association or condominium dues					
3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$ 0.00  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4c. \$ 0.00  4d. Homeowner's association or condominium dues					_
3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$ 0.00  4d. Homeowner's association or condominium dues					<u> </u>
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. Homeowner's association or condominium dues	3.	expenses of people other than			_ 103
expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$  0.00  4d. Homeowner's association or condominium dues					
the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. The rental or home ownership expenses 4d. \$ 0.00 0.00 0.00 0.00 0.00 0.00 0.00	exp	penses as of a date after the bankruptcy is filed. If this is a supplement			
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues  1,100.00  4					
payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues  4. \$ 1,100.00  4. \$ 0.00	(Of	ficial Form 106I.)		Your exp	penses
4a.Real estate taxes4a.\$0.004b.Property, homeowner's, or renter's insurance4b.\$20.004c.Home maintenance, repair, and upkeep expenses4c.\$0.004d.Homeowner's association or condominium dues4d.\$0.00	4.	• • •		1. \$	1,100.00
4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$  0.00		If not included in line 4:			
4c. Home maintenance, repair, and upkeep expenses 4c. \$  4d. Homeowner's association or condominium dues 4d. \$  0.00		4a. Real estate taxes	4a	a. \$	0.00
4d. Homeowner's association or condominium dues 4d. \$ 0.00		•			
· · · · · · · · · · · · · · · · · · ·					
	5.			· ·	

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Debtor 1	Levon F	larris	_ Case num	nber (if known)	
6. <b>Uti</b> l	lities:				
6a.		, heat, natural gas	6a.	\$	135.00
6b.		ewer, garbage collection	6b.		22.00
6c.	,	e, cell phone, Internet, satellite, and cable services	6c.		349.00
6d.	•		6d.		0.00
		sekeeping supplies	7.		0.00
		children's education costs	8.	· —	0.00
_		dry, and dry cleaning	9.	· <u> </u>	0.00
	_		9. 10.	*	
		products and services		·	0.00
		ental expenses	11.	Ф	0.00
		Include gas, maintenance, bus or train fare. car payments.	12.	\$	115.00
		clubs, recreation, newspapers, magazines, and books	13.	·	60.00
				· -	
		tributions and religious donations	14.	Φ	0.00
-	urance.	nsurance deducted from your pay or included in lines 4 or 20			
	not include ii a. Life insura		15a.	\$	55.00
	b. Health ins		15a. 15b.		
				·	0.00
	c. Vehicle in		15c.		122.00
		urance. Specify:	15d.	<b>5</b>	0.00
		nclude taxes deducted from your pay or included in lines 4 or		Φ.	• • •
	ecify:		16.	Ф	0.00
		lease payments:	17-	¢	F00.00
		nents for Vehicle 1	17a.		599.00
	. ,	nents for Vehicle 2	17b.		0.00
	c. Other. Sp	· · · · · · · · · · · · · · · · · · ·	17c.		0.00
	d. Other. Sp	•	17d.	\$	0.00
		s of alimony, maintenance, and support that you did not		¢	0.00
		your pay on line 5, Schedule I, Your Income (Official For	<b>m 106l).</b> 18.		
		s you make to support others who do not live with you.		\$	0.00
	ecify:	control and a second declarate decla	19.		
		perty expenses not included in lines 4 or 5 of this form of			0.00
		s on other property	20a.		0.00
	o. Real esta		20b.		0.00
		homeowner's, or renter's insurance	20c.		0.00
200	d. Maintena	nce, repair, and upkeep expenses	20d.	\$	0.00
20€	e. Homeowr	ner's association or condominium dues	20e.	\$	0.00
1. <b>Ot</b> h	ner: Specify:	Birthdays/Holidays/Haircuts	21.	+\$	50.00
					75.53
	•	monthly expenses			
	a. Add lines 4	•		\$	2,627.00
22b	o. Copy line 2	22 (monthly expenses for Debtor 2), if any, from Official Form	106J-2	\$	
220	c. Add line 22	2a and 22b. The result is your monthly expenses.		\$	2,627.00
		, , ,			_,
	-	monthly net income.	_	•	
		12 (your combined monthly income) from Schedule I.	23a.	· -	2,638.18
23b	c. Copy you	r monthly expenses from line 22c above.	23b.	-\$	2,627.00
230		your monthly expenses from your monthly income.	00-	œ.	11.18
	The resul	t is your monthly net income.	23c.	\$	11.10
	, ,	an increase or decrease in your expenses within the year	•		roaco or dooroaco boosugo ef a
		ou expect to finish paying for your car loan within the year or do you terms of your mortgage?	expect your mortgage	payment to inc	rease or decrease decause of a
	No.	. toe e. your mongage.			
	Yes.	Explain here:			

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							1
Fill in th	nis inform	ation to identify your	case:				
Debtor '	1	Levon Harris					
		First Name	Middle Name	La	st Name		
Debtor 2 (Spouse if		First Name	Middle Name	la	st Name		
	•						
United S	States Ban	kruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLING	DIS		
Case nu	ımber						
(if known)	_						☐ Check if this is an
							amended filing
Officia	al Form	106Dec					
			مرياه مانينا مر	l Dobt	orlo Cobos	مماييا	
Dec	ıaratı	on About a	<u>ın Individua</u>	ii Debt	or s Sched	uies	12/15
lf two m	arried nec	onle are filing together	r, both are equally resp	onsible for	supplying correct inf	formation	
	arrica pec	opic are ming together	, both are equally resp	onsible for .	supplying correct in	ormation.	
							tement, concealing property, or
		or property by fraud if U.S.C. §§ 152, 1341, 1		nkruptcy cas	se can result in fines	up to \$250,0	00, or imprisonment for up to 20
<b>,</b> ,		33,, .					
	Sign	Below					
Die	d you pay	or agree to pay some	one who is NOT an atte	orney to help	p you fill out bankrup	otcy forms?	
_	No						
_						A44 Dav	aliminatori Datition Duomonovio Notico
	res. Na	ame of person					nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
							,
Uma	dar nanalt	n, of markers, I doctors	that I have road the av		achadulaa filad with	thio doclarati	ion and
		true and correct.	that I have read the su	mmary and	schedules filed with	tnis deciarati	ion and
v				v			
<b>X</b>	/s/ Levo			X	Signature of Debtor	2	
		e of Debtor 1			Signature of Debtor	_	
	Ü				_		
	Date J	uly 12, 2017			Date		

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Fill i	n this inform	nation to identify you	r case:						
Debt	or 1	Levon Harris First Name	Mic	ddle Name		Last Name			
Debt	or 2 se if, filing)	First Name	Mic	ddle Name		Last Name			
		nkruptcy Court for the:		HERN DISTRICT (	OF ILL IN				
		intupitely Court for the.	1101111	IERRI DIOTRIOT	OI ILLII	10.0			
(if kno	e number wn)							_	heck if this is an mended filing
	icial Foi tement	rm 107 of Financial	Affairs	s for Indivi	duals	s Filing for B	Bankruptcy		4/1
infori	nation. If m	nd accurate as poss ore space is needed, n). Answer every que	attach a s						
Part	1: Give D	etails About Your Ma	rital Statu	s and Where You	ı Lived	Before			
1. \	What is your	current marital statu	ıs?						
 	■ Married □ Not mar	ried							
2. I	During the la	ast 3 years, have you	lived anyv	where other than	where	you live now?			
	□ No								
I	Yes. Lis	t all of the places you	ived in the	last 3 years. Do n	ot includ	de where you live nov	٧.		
	Debtor 1 Pri	ior Address:		Dates Debtor 1 lived there		Debtor 2 Prior Ac	ddress:		Dates Debtor 2 lived there
	215 Rebec Belvidere,			From-To: 12/2014 - 12/2	2016	☐ Same as Debtor	1		☐ Same as Debtor 1 From-To:
-	3812 Sewa Rockford,			From-To: <b>2011 - 12/201</b>	4	☐ Same as Debtor	1		☐ Same as Debtor 1 From-To:
		est <b>8 years, did you e</b> es include Arizona, Ca							? (Community property isconsin.)
	■ No □ Ves Ma	ike sure you fill out <i>Sci</i>	nedule H: \	/our Codebtors (C	ifficial E	orm 106H)			
		·		our oddebiors (o	illolal I v	51111 10011).			
Part	2 Explai	n the Sources of You	r Income						
I	Fill in the tota	e any income from er al amount of income you ag a joint case and you	u received	from all jobs and	all busir	esses, including part	-time activities.	vious calen	dar years?
ı	□ No								
I	Yes. Fill	in the details.							
			Debtor 1				Debtor 2		
				of income that apply.	(befo	ss income ore deductions and usions)	Sources of inco		Gross income (before deductions and exclusions)

Page 34 of 51 Case number (if known) Debtor 1 Levon Harris

					Debtor 1			Debtor 2		
					Sources of income Check all that apply.		s income e deductions and sions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
					■ Wages, commissions, bonuses, tips		\$24,167.94	☐ Wages, combonuses, tips	missions,	
					☐ Operating a business			☐ Operating a	business	
			dar year: December	31, 2016 )	■ Wages, commissions, bonuses, tips		\$31,602.13	☐ Wages, com bonuses, tips	missions,	
					☐ Operating a business			☐ Operating a	business	
			lar year be December		■ Wages, commissions, bonuses, tips		\$53,489.00	☐ Wages, com bonuses, tips	missions,	
					☐ Operating a business			☐ Operating a	business	
Include income regardless of whether that income is taxable. Examples of <i>other income</i> are alimony; child support; Social Security, unemplo and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and I winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.  List each source and the gross income from each source separately. Do not include income that you listed in line 4.  No  Yes, Fill in the details.										
					Debtor 1			Debtor 2		
					Sources of income Describe below.	each	s income from source e deductions and sions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3:	List	Certain Pa	nyments You	Made Before You Filed for I	Bankrup	tcv			
6.					s debts primarily consumer	-				
υ.	_	No.	Neither D	ebtor 1 nor D	ebtor 2 has primarily consumer personal, family, or househol	ımer del		s are defined in 11	U.S.C. § 10 <sup>-</sup>	1(8) as "incurred by an
					re you filed for bankruptcy, di	d you pa	y any creditor a tota	al of \$6,425* or mo	re?	
				Go to line 7						
			☐ Yes * Subject	paid that cre not include	each creditor to whom you pai editor. Do not include paymen payments to an attorney for th on 4/01/19 and every 3 years	nts for do nis bankr	mestic support obliquetcy case.	gations, such as ch	ild support a	nd alimony. Also, do
Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?										
			■ No.	Go to line 7						
			□ Yes	List below e include pay	each creditor to whom you pai ments for domestic support of this bankruptcy case.					
	Cred	ditor's	s Name an	d Address	Dates of payme	ent	Total amount	Amount you	Was this p	payment for

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Case number (if known) Document Debtor 1 Levon Harris Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and

	aimony.							
	■ No							
	☐ Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you		r this payment		
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.							
		,						
	<ul><li>■ No</li><li>☐ Yes. List all payments to an insider</li></ul>							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still ow		r this payment ditor's name		
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures						
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of t	Status of the case		
	Portfolio Recovery Associates, LLC v. Levon Harris 2017 SC 3	Contract	Winnebago County Circuit Court 400 W State St Rockford, IL 61101		☐ On app	■ Pending □ On appeal □ Concluded		
	Shelley Harris v. Levon Harris 2017 D 480	Divorce	Winnebago County Circuit Court 400 W State St Rockford, IL 61101		☐ On app	■ Pending □ On appeal □ Concluded		
	Levon Harris v. Chrysler Assembly Plant 15 WC 023838	Workers Compensation	Illinois Workers Compensation Commission 200 South Wyman Rockford, IL 61101		<b>າ</b> □ On app	■ Pending □ On appeal □ Concluded		
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below		erty repossessed, fo	oreclosed, gar	rnished, attache	d, seized, or levied?		
	<ul><li>□ No. Go to line 11.</li><li>■ Yes. Fill in the information below.</li></ul>							
	Creditor Name and Address	Describe the Property Date			ate	Value of the		
		Explain what happened				property		
	Mutual Management Services Co., LLC	Wages 1/2			2017 - 2017	\$131.07		
	7177 Crimson Ridge Dr., Suite 10 PO Box 8740	☐ Property was repossessed. ☐ Property was foreclosed.						
	Rockford, IL 61126-6235	■ Property was garnished.						
		☐ Property was attached, seized or levied.						

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Case number (if known) Document Debtor 1 Levon Harris

	Creditor Name and Address		scribe the Property	Date	Value of the			
		Ex	plain what happened		property			
	Wisconsin Child Support WI-SCTF	Wa	ages	6/2016 - 6/2017	\$8,107.52			
	PO Box 74200		Property was repossessed.	0/20				
	Milwaukee, WI 53274		Property was foreclosed.					
			Property was garnished.					
			Property was attached, seized or levied.					
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?  No  Yes. Fill in the details.							
	Creditor Name and Address		scribe the action the creditor took	Date action was	Amount			
				taken				
12.	<ul> <li>Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?</li> <li>No</li> <li>Yes</li> </ul>							
Dav	List Contain Ciffs and Contribution							
Par	t 5: List Certain Gifts and Contribution	ns						
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  ■ No  ■ Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$6	600	Describe the gifts	Dates you gave	Value			
	per person			the gifts				
	Person to Whom You Gave the Gift and Address:	d						
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?							
	No							
	Yes. Fill in the details for each gift or contribution.							
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)				Value			
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?							
	■ No							
	☐ Yes. Fill in the details.							
	Describe the property you lost and	Descri	be any insurance coverage for the loss	Date of your loss	Value of property lost			
	how the loss occurred		the amount that insurance has paid. List pending accellaims on line 33 of Schedule A/B: Property.					

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Par	17: List Certain Payments or Transfers					
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?  Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.					
	□ No ■ Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	transferred	value of any property	у	Date payment or transfer was made	Amount of payment
	001DebtorCC 378 Summit Ave. Jersey City, NJ 07306 www.debtorcc.org	\$14.95			6/16/2017	\$14.95
	Springer Law Firm 2222 E State St, Suite 107 Rockford, IL 61104	\$450.00			6/2017	\$450.00
17.	Within 1 year before you filed for bankruptour promised to help you deal with your creditour Do not include any payment or transfer that you	ors or to make paymen		half pay o	r transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and transferred	value of any property	y	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your landled both outright transfers and transfers minclude gifts and transfers that you have alreated No  Yes. Fill in the details.	ousiness or financial at nade as security (such as	ffairs? s the granting of a secu			
	Person Who Received Transfer Address Person's relationship to you	Description and property transfe	erred		ny property or received or debts change	Date transfer was made
<ul> <li>19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust beneficiary? (These are often called asset-protection devices.)</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>				st or similar device	of which you are a	
	Name of trust	Description and	value of the property	/ transferre	ed	Date Transfer was made
Par	8: List of Certain Financial Accounts, In	nstruments, Safe Depo	sit Boxes, and Storag	e Units		
20.	Within 1 year before you filed for bankruptous sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso	or other financial acco	unts; certificates of d		•	, ,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account o instrument	clos	e account was sed, sold, ved, or	Last balance before closing or transfer

transferred

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Debtor 1 Levon Harris

21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?				
	No Silvinia de la cita				
	Yes. Fill in the details.		<b>5</b>	5 (111	
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?	
22.	Have you stored property in a storage unit or pla	ace other than your home within 1	year before you filed for bankruptcy?		
	No				
	Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?	
Par	9: Identify Property You Hold or Control for S	Someone Else			
23.	Do you hold or control any property that someo for someone.	ne else owns? Include any propert	ty you borrowed from, are storing for,	or hold in trust	
	No				
	Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value	
Par	10: Give Details About Environmental Information	ation			
For	he purpose of Part 10, the following definitions	apply:			
	Environmental law means any federal, state, or toxic substances, wastes, or material into the ai regulations controlling the cleanup of these sub	ir, land, soil, surface water, ground	— ·		
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		aw, whether you now own, operate, or	r utilize it or used	
	<i>Hazardous material</i> means anything an environi hazardous material, pollutant, contaminant, or s		waste, hazardous substance, toxic su	ıbstance,	
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred.		
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	under or in violation of an environmen	ntal law?	
	No				
	Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
25. Have you notified any governmental unit of any release of hazardous material?					
	No				
	Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	

Case number (if known) Debtor 1 Levon Harris 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper **Dates business existed** 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Levon Harris Signature of Debtor 2 **Levon Harris** Signature of Debtor 1 Date July 12, 2017 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person \_\_\_ \_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	mation to identify your	case.		
Debtor 1		case.		
Debior	Levon Harris First Name	Middle Name	Last Name	<del></del>
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
			TRICT OF ILLINOIS	
United States Ba	inkruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS	<del></del>
Case number _				☐ Check if this is an amended filing
Official Fo		n for Indiv	iduals Filing Under Cl	napter 7 12/15
	ividual filing under cha e claims secured by yo		out this form if:	
you have leas You must file thi	sed personal property a s form with the court w ever is earlier, unless th	nd the lease has no rithin 30 days after	ot expired. you file your bankruptcy petition or by th e time for cause. You must also send cop	
	eople are filing together	r in a joint case, bo	th are equally responsible for supplying o	correct information. Both debtors must
	and accurate as possib our name and case nur		needed, attach a separate sheet to this f	orm. On the top of any additional pages,
Part 1: List Yo	our Creditors Who Have	e Secured Claims		
1. For any credit	ors that you listed in Pa		: Creditors Who Have Claims Secured by	Property (Official Form 106D), fill in the
Identify the cr	elow. editor and the property t	hat is collateral	What do you intend to do with the prop secures a debt?	erty that Did you claim the property as exempt on Schedule C?
Creditor's <b>E</b> name:	xeter Finance		☐ Surrender the property. ☐ Retain the property and redeem it.	□No
Description of	2015 Nissan Altima	a	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt:			☐ Retain the property and [explain]:	
Part 2: List Yo	our Unexpired Persona	l Property I eases		
For any unexpire in the information	ed personal property le on below. Do not list rea	ase that you listed Il estate leases. Un	in Schedule G: Executory Contracts and expired leases are leases that are still in the trustee does not assume it. 11 U.S.C.	Unexpired Leases (Official Form 106G), fill effect; the lease period has not yet ended. § 365(p)(2).
Describe your u	nexpired personal pro	perty leases		Will the lease be assumed?
•				
Lessor's name: Description of lea	ased			□ No
Property:				☐ Yes
Lessor's name:				□ No
Description of lea Property:	ased			☐ Yes
				Li res
Lessor's name:				□ No
Official Form 108		Statement of In	tention for Individuals Filing Under Chap	er 7 page

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Debtor '	1 Levon Harris	Case number (if known)	
Descript Property	otion of leased y:		□ Yes
	tion of leased		□ No
Property	у:		☐ Yes
Lessor's	s name: otion of leased		□ No
Property			☐ Yes
Lessor's			□ No
Property	vition of leased y:		☐ Yes
Lessor's			□ No
Property	viion of leased y:		☐ Yes
Part 3:	Sign Below		
	enalty of perjury, I declare that I have indicated my intenti y that is subject to an unexpired lease.	on about any property of my estate that sec	cures a debt and any personal
, <u> </u>	/ Levon Harris	X	
	evon Harris gnature of Debtor 1	Signature of Debtor 2	
Da	July 12, 2017	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-81643 Doc 1 Filed 07/12/17 Entered 07/12/17 16:58:33 Desc Main Document Page 46 of 51

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

In 1	re _ <b>Levon Harris</b>		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMP	ENSATION OF ATTOR	RNEY FOR D	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fibe rendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptcy,	or agreed to be paid	l to me, for services re-	
	For legal services, I have agreed to accept		\$	450.00	
	Prior to the filing of this statement I have receive	d	\$	450.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed con	mpensation with any other person	unless they are men	nbers and associates of	my law firm.
	☐ I have agreed to share the above-disclosed compe copy of the agreement, together with a list of the				ıw firm. A
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspects	s of the bankruptcy	case, including:	
	<ul><li>a. Analysis of the debtor's financial situation, and rer</li><li>b. Preparation and filing of any petition, schedules, s</li><li>c. Representation of the debtor at the meeting of cred</li><li>d. [Other provisions as needed]</li></ul>	tatement of affairs and plan which litors and confirmation hearing, an	may be required; d any adjourned he	arings thereof;	
	Negotiations with secured creditors to reaffirmation agreements and applicated 522(f)(2)(A) for avoidance of liens on I	tions as needed; preparation			
6.	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any oany other adversary proceeding.			es, relief from stay	actions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of bankruptcy proceeding.	any agreement or arrangement for	payment to me for	representation of the d	ebtor(s) in
_	July 12, 2017	/s/ Daniel A. Sprir			
	Date	Daniel A. Springe Signature of Attorne			
		Springer Law Firr			
		2222 E State St			
		Suite 107 Rockford, IL 6110	4		
		815.312.4725			
		dspringerlaw@gr	nail.com		
		Name of law firm			

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Desc Main

Springer Law Firm

2222 East State St. # 107, Rockford, IL

815.312.4725

### **CHAPTER 7 RETAINER AGREEMENT**

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- 1. The attorney fees for the Chapter 7 bankruptcy are \$500. This is a flat fee arrangement, and does not include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold.

  Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement. This includes adversary proceedings that may fall under the bankruptcy case. This agreement does not include representation in such adversary proceedings.
- 7. I understand that all money paid towards attorney fees is non-refundable. I understand that once I pay Springer Law, that Springer Law begins work on my case. I understand that the majority of bankruptcy work is done prior to the filing of the case, and because of this the fees are earned even before the filing of the case.
- 8. I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 9. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.
- 10. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Dated: $6/20/17$	
Signature: //w//	Attorney Signature: MM
Print Name: Levon Harris	Attorney Print: M, Chail Blogge Sun

# **United States Bankruptcy Court Northern District of Illinois**

-	Lavan Hamia		C N	
In re	Levon Harris	Debtor(s)	Case No. Chapter 7	
	VE	ERIFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	28
	The above-named Debtor(s) (our) knowledge.	) hereby verifies that the list of credit	ors is true and correct to t	the best of my
Date:	July 12, 2017	/s/ Levon Harris Levon Harris Signature of Debtor		

Alpine Bank 1700 N. Alpine Road Rockford, IL 61107

AT&T PO Box 6416 Carol Stream, IL 60197

Blatt Hasenmiller Leibsker & Moore 211 Landmark Drive, Suite C-1 Normal, IL 61761

Brandi Marie King 2308 MacGregor Court Albany, GA 31721

Convergent Healthcare Inc. Attn: Bankruptcy Dept. 121 NE Jefferson St. Suite 100 Peoria, IL 61602

Enhanced Recovery Company Attn: Bankruptcy Dept. PO Box 57547 Jacksonville, FL 32241

Equifax PO Box 740256 Atlanta, GA 30374

Exeter Finance Attn: Bankruptcy Dept. PO Box 166097 Irving, TX 75016-6097

Experian PO Box 4500 Allen, TX 75013

GM Financial PO Box 181145 Arlington, TX 76096 Great American Financial 20 West Wacker Drive, Suite 2275 Chicago, IL 60606

IRS Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346

James C. Thompson 515 N. Court St. Rockford, IL 61103

Mutual Management Services Co., LLC 7177 Crimson Ridge Dr., Suite 10 PO Box 8740 Rockford, IL 61126-6235

OSF St. Anthony Med Center Attn: Bankruptcy Dept. 5510 East State St. Rockford, IL 61108-2381

Personal Finance 19065 Hickory Creek Drive Mokena, IL 60448

Portfolio Recovery Associates Attn: Bankruptcy Dept. 120 Corporate Blvd., Ste 100 Norfolk, VA 23502

Rockford Gastroenterology Associate Attn: Bankruptcy Dept. 401 Roxbury Rd. Rockford, IL 61107-6075

Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108

Rockford Radiology Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103 Security Finance Corporation Attn: Bankruptcy Dept. PO Box 3146 Spartanburg, SC 29304

Swedish American Health System Attn: Bankruptcy Dept. 1401 East State Street Rockford, IL 61104

T-Mobile Bankruptcy Team PO Box 53410 Bellevue, WA 98015-3410

TransUnion 555 West Adams Street Chicago, IL 60661

Winnebago County Circuit Court 400 W State St 2015 SC 789 Rockford, IL 61101

Winnebago County Circuit Court 400 W State St 2017 SC 3 Rockford, IL 61101

Wisconsin Child Support WI-SCTF PO Box 74200 Milwaukee, WI 53274

World Financial Network Bank 4590 E. Broad St. Columbus, OH 43213